MANOSMEDI WORKSHOP Friday May 19th and Saturday May 20th 2023 REA Maternity Hospital

Athens, Greece REA MATERNITY HOSPITAL - Sygrou Avenue 383, 17564 Palaio Faliro _ Athens, Greece

REGISTRATION FORM

Please fill out this form and send by fax or e-mail to the Secretariat of the Workshop PRC CONGRESS & TRAVEL

105 Michalakopoulou str., 115 27 Athens, Greece

Tel.: +30-210-7711673, 7756336, Fax: +30-210-7711289, E-mail: congress3@prctravel.gr

PARTICIPANT'S DETAILS					
Family name:	First Name:				
Department/Institution:	Specialty:				
Street:	City:				
Zip code:	Country:				
Tel.:	E-Mail:				
REGISTRATION FEES					
Early Registration Specialist Until April 30th , 20	023 🔲 200 EURO				
Late Registration Specialist From May 1st , 2023	300 EURO □ 300 EURO				
Early Registration Residents/ Midwives Until April 30th, 2023	☐ 50 EURO				
Late Registration Residents/ Midwives From May 1st , 2023	☐ 60 EURO				
Early Registration for Online participation Until April 30th , 2023	☐ 120 EURO				
Late Registration for Online participation From May 1^{st} , 2023	☐ 150 EURO				

MANOSMEDI WORKSHOP Friday May 19th and Saturday May 20th 2023 REA Maternity Hospital

Athens, Greece

REA MATERNITY HOSPITAL - Sygrou Avenue 383, 17564 Palaio Faliro _ Athens, Greece

Registration fee includes:

- ✓ Admission to all scientific sessions
- ✓ Hands on
- ✓ Live Surgery
- ✓ Wi- Fi use
- ✓ Badge and course documents
- ✓ Workshop bag

Card Holder's Signature:

- ✓ Certificate on Attendance
- ✓ Coffee during the breaks
- ✓ Lunch

METHOD OF PAYMENT

METHOD OF FAIMENT
1. BANK TRANSFER I have transferred the total amount of Euro to the following bank account of PRC CONGRESS & TRAVEL as a full payment for my registration to the MANOSMEDI WORKSHOP 2023
Bank Account Bank: ALPHA BANK Beneficiary Name: IORDANIS CHALIVIDIS & SIA E.E Account Number: 130 00 2320001056 IBAN: GR 6001 4013 0013 0002 3200 01056 Swift Code: CRBAGRAAXXX
 Kindly make sure that your name is noted on the swift bank order and that the respective bank commission has been added. Bank Charges are not shared - Bank Expenses should be covered by you. The bank receipt must be forwarded to PRC Congress & Travel along with this form, by e-mail or fax in order for your registration to be confirmed.
2. CREDIT CARD
I hereby authorize PRC CONGRESS & TRAVEL to immediately charge my credit card mentioned below with the amount of Euro as a full payment for my registration to the MANOSMEDI WORKSHOP 2023
Credit Card Details Visa
Card Holder's Name:
Card Number:
Expiry date:
CCV Number (last 3 digits at the back of the card):

- Card holder's original signature is required to proceed with the registration.
- A photocopy of both sides of the credit card must be forwarded along with your Registration Form.

MANOSMEDI WORKSHOP Friday May 19th and Saturday May 20th 2023 REA Maternity Hospital

Athens, Greece

REA MATERNITY HOSPITAL - Sygrou Avenue 383, 17564 Palaio Faliro _ Athens, Greece

- Please note that there is a 3% commission on credit card for bank charges.
- Personal cheques and Eurocheques are not accepted.

CANCELLATION POLICY FOR REGISTRATION FEES

For cancellations made up to April 30^{th} , 2023 a 100% refund will be granted. For cancellations made after May 1^{st} , 2023 no refund will be available

I hereby confirm that I have read and agree with all terms, conditions and cancellation policy for my registration in the MANOSMEDI WORKSHOP 2023

Date:	/	/	Signature: